

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 35
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Podiatric Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Stuart A. Courtney

Mailing Address 1250 E. Hallandale Beach Blvd. #10

City State Zip Code
Hallandale FL 33009-4636

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Podiatric Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

01 / 20 / 2016

Transaction ID : A375437F0E82D41C88FD

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Derek Dalling

Mailing Address 1000 W Saint Joseph St
Ste 200

City State Zip Code
Lansing MI 48915-2552

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kindsvatter Dalling and Associates

Occupation

Executive Director-AAPPM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

01 / 30 / 2016

Transaction ID : A6EC3208F9453435B8DA

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Robert Paul Dunne

Mailing Address Lake Washington Foot & Ankle
2717 N. Wickham Rd. #4

City State Zip Code
Melbourne FL 32935

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Washington Foot & Ankle

Occupation

Podiatric Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

01 / 29 / 2016

Transaction ID : A518C9CE1B8294C4782C

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00